

PART B - FEE(S) TRANSMITTAL

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O'Melveny & Myers LLP
IP&T Calendar Department LA-13-A7
400 South Hope Street
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Cynthia B. Pacheco (Depositor's name)
Cynthia B. Pacheco (Signature)
June 17, 2010 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/653,879 09/02/2003 Timothy B. Petrick 891,144-001 5033

TITLE OF INVENTION: DEVICES AND METHODS FOR CROSSING A CHRONIC TOTAL OCCLUSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional YES NO \$150 \$300 \$0 \$150 \$1810 07/06/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
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CAMPBELL, VICTORIA P 3763 604-527000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address for Change of Correspondence Address form PTO/SB/122 attached.
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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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O'Melveny & Myers LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

St. Jude Medical, Cardiology Division, Inc.

St. Paul, MN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Jennifer M. Pascua*

Date June 17, 2010

Typed or printed name Jennifer M. Pascua

Registration No. 56,489

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